Effective December 29, 1999													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								*	SMALL I	ENTITY	OR	OTHER SMALL I	
FOR			NUMBER FILED			NUMBER	EXTRA	Γ	RATE	FEE	1 [RATE	FEE
BASIC FEE						-,,	\$	T	1 4	345.00	OR	*10	690.00
TOTAL CLAIMS				minus 2	20=	*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS				minus	3 =				X39=		l t	X78=	
MULTIPLE DEPENDENT CLAIM PRESENT								F		ļ	OR		
* If the difference in column 1 is less than zero, enter "0" in column 2								L	+130=		OR	+260=	7
								,	TOTAL		OR	TOTAL	690
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)									OTHER THAT SMALL ENTITY OR SMALL ENT				
	A STATE OF THE STATE OF		umn 1) AIMS	17. The 20 m		Column 2) HIGHEST	(Column 3)	-	OWALL I		OR I [OWIALL I	
AMENDMENT A		REM AF	AINING TER NDMENT	100	l PR	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	. 2	8	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	4	Minus **			=	r	X39=		OR	X78=	
	FIRST PRESE	NIATIC	JN OF MI	ULTIPLE DEF	-EN[JENT CLAIM			+130=	·	OR	+260=	
								L	TOTAL		יחו	TOTAL	
		(Col	umn 1)		10	Column 2)	(Column 3)	Α[ODIT. FEE	·	lon,	ADDIT. FEE	
~		CL	AIMS	Of the Park		HIGHEST				ADDI-			ADDI-
AMENDMENT B		Af	IAINING FTER NDMENT		PF	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*		Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*		Minus	***		=		X39=		OR	X78=	
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								·			,	
								L	+130=		OR	+260=	
								AC	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
	En en en a san		umn 1)			Column 2)	(Column 3)						
AMENDMENT C	, q	REM AF	AIMS AINING TER IDMENT		PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total			Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*		Minus	***	•	=	十	X39=			X78=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							\vdash	7.03-		OR	7/0=	<u> </u>
. ,	f the entrein and	nn t :- ·	000 thr= "		m- ^	write son .	Lump 2		+130=		OR	+260=	
**	If the entry in colur If the "Highest Nur If the "Highest Nur	mber Pre	eviously Pa	aid For" IN THI	S SPA	ACE is less tha	n 20, enter "20."	AD	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
	The "Highest Num							r found	d in the and	propriate box	cin col	umn 1.	

Application or Docket Number